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SEP 26 2005

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32940 7590 06/24/2005

**DORSEY & WHITNEY LLP
INTELLECTUAL PROPERTY DEPARTMENT
4 EMBARCADERO CENTER
SUITE 3400**

SAN FRANCISCO, CA 94111
09/27/2003 JBLHLMHE 00000059 10678917

01 FC:2501 700.00 OP
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03 FC:0001 30.00 OP

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Laura Lee Mosier

(Depositor's name)

(Signatures)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/678,917	10/02/2003	Peter M. Graf	A-72340/RBC FILE NO. 463	1418

TITLE OF INVENTION: ORTHOPEDIC CASTING SLIPPER KIT ~~AND METHOD~~

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	09/26/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DAVIS, ROBERT B	1722	425-002000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>Dorsey & Whitney LLP</u>
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2. _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

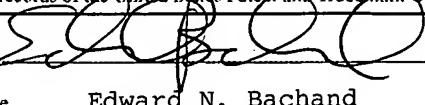
4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 30-2319 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature 

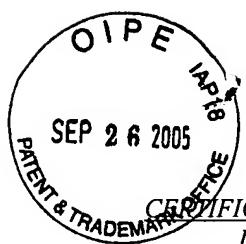
Date September 22, 2005

Typed or printed name Edward N. Bachand

Registration No. 37,085

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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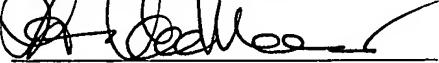


A-72340/ENB
463817-39

CERTIFICATE OF MAILING (37 CFR 1.8(A))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 23, 2005.

Signed:



Laura Lee Mosier

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Peter M. GRAF *et al.*

Serial No. 10/678,917

Filed: October 2, 2003

For: AN ORTHOPEDIC CASTING
SLIPPER KIT (as amended)

Date of Allowance: June 24, 2005

Examiner: DAVIS, Robert B.

Art Unit No.: 1722

Class-Sub Class: 425-002000

Date: September 23, 2005

SUBMISSION OF ISSUE FEE

Mail Stop ISSUE FEE
Commissioner for Patents
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Sir:

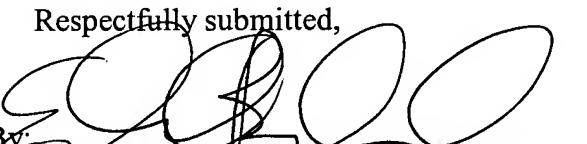
Pursuant to the Notice of Allowance mailed June 24, 2005, enclosed herewith is:

[X] Completed Issue Fee Transmittal, Form PTOL-85; and
[X] Our check in the amount of \$1,030 (\$700 for the issue fee, small entity,
\$300 for the publication fee and \$30 for ten (10) soft copies).

The Commissioner is authorized to charge any underpayment of fees or credit any overpayment to counsel's Deposit Account No. 50-2319 (Order No. A-72340/ENB(463817-39)).

Date: September 23, 2005

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Respectfully submitted,

By: Edward N. Bachand
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